

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND			
1 Date of Request:	2 Serial/Patent #	10/5/1958	
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED
Filing			\$ 100
Amendment			\$
Extension of Time			\$
Notice of Appeal/Appeal			\$
Petition			\$
Issue			\$
Cert of Correction/Terminal Disc.			\$
Maintenance			\$
Assignment			\$
Other			\$
		7 TOTAL AMOUNT OF REFUND	\$ 100
10 REASON:		8 TO BE REFUNDED BY:	
<input checked="" type="checkbox"/> Overpayment		Treasury Check	
<input checked="" type="checkbox"/> Duplicate Payment		Credit Deposit A/C #:	
<input checked="" type="checkbox"/> No Fee Due (Explanation)		, 13-0235	
PCT NATIONAL DIVISION			
11 REFUND REQUESTED BY:			
TYPED/PRINTED NAME:		TITLE: <i>Tamala Holland</i>	
SIGNATURE: <i>T. Holland</i>		PHONE: 703-308-9140	
OFFICE: PCT		X209	
***** THIS SPACE RESERVED FOR FINANCE USE ONLY *****			
APPROVED: _____		DATE: _____	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B